FILE 'CAPLUS, EMBASE, SCISEARCH, TOXCENTER, CANCERLIT, USPATFULL, PCTFULL' ENTERED AT 07:37:04 ON 12 MAY 2004

ACTIVATE L09884466/L

```
80206) SEA FILE-CAPLUS ABB-ON PLU-ON FATIGUE OR TIREDNESS OR (LOSS O
L1
          38777) SEA FILE=EMBASE ABB=ON PLU=ON FATIGUE OR TIREDNESS OR (LOSS O
L2
   (
          51006) SEA FILE=SCISEARCH ABB=ON PLU=ON FATIGUE OR TIREDNESS OR (LOS
L3
          13102) SEA FILE=TOXCENTER ABB=ON PLU=ON FATIGUE OR TIREDNESS OR (LOS
L4
L_5
          4632) SEA FILE=CANCERLIT ABB=ON PLU=ON FATIGUE OR TIREDNESS OR (LOS
          69638) SEA FILE=USPATFULL ABB=ON PLU=ON FATIGUE OR TIREDNESS OR (LOS
L6
L7
         15288) SEA FILE=PCTFULL ABB=ON PLU=ON FATIGUE OR TIREDNESS OR (LOSS
         272649) SEA FATIGUE OR TIREDNESS OR (LOSS OF ENERGY)
L9
         645419) SEA FILE=CAPLUS ABB=ON PLU=ON RADIATION OR (RADIO? (2W) (THER
L10 (
         204837) SEA FILE=EMBASE ABB=ON PLU=ON RADIATION OR (RADIO? (2W) (THER
ыл (
         281559) SEA FILE=SCISEARCH ABB=ON PLU=ON RADIATION OR (RADIO? (2W) (T
L12 (
         299225) SEA FILE=TOXCENTER ABB=ON PLU=ON RADIATION OR (RADIO? (2W) (T
L13 (
         109876) SEA FILE=CANCERLIT ABB=ON PLU=ON RADIATION OR (RADIO? (2W) (T
L14 (
         303241) SEA FILE=USPATFULL ABB=ON PLU=ON RADIATION OR (RADIO? (2W) (T
L15 (
         77863)SEA FILE=PCTFULL ABB=ON PLU=ON RADIATION OR (RADIO? (2W) (THE
L16 (
        1922020) SEA RADIATION OR (RADIO? (2W) (THERAPY OR TREATMENT))
L17 (
         86864) SEA FILE=CAPLUS ABB=ON PLU=ON (SIDE OR ADVERSE OR UNWANTED) (
         400995) SEA FILE=EMBASE ABB=ON PLU=ON (SIDE OR ADVERSE OR UNWANTED) (
L18 (
L19 (
         99725)SEA FILE=SCISEARCH ABB=ON PLU=ON (SIDE OR ADVERSE OR UNWANTED
L20 (
        712016) SEA FILE=TOXCENTER ABB=ON PLU=ON (SIDE OR ADVERSE OR UNWANTED
L21 (
        143723) SEA FILE=CANCERLIT ABB=ON PLU=ON (SIDE OR ADVERSE OR UNWANTED
        209323) SEA FILE-USPATFULL ABB-ON PLU-ON (SIDE OR ADVERSE OR UNWANTED
L22 (
L23 (
         62546) SEA FILE=PCTFULL ABB=ON PLU=ON (SIDE OR ADVERSE OR UNWANTED)
        1715192) SEA (SIDE OR ADVERSE OR UNWANTED) (2A) (EFFECT? OR CONSEQUENC?
L24 (
             6) SEA FILE=CAPLUS ABB=ON PLU=ON L1 (1S) L9 (1S) L17
L25 (
L26 (
             45) SEA FILE=EMBASE ABB=ON PLU=ON L2 (1S) L10 (1S) L18
L27 (
            17) SEA FILE=SCISEARCH ABB=ON PLU=ON L3 (1S) L11 (1S) L19
L28 (
            18) SEA FILE=TOXCENTER ABB=ON PLU=ON L4 (1S) L12 (1S) L20
L29 (
            72) SEA FILE=CANCERLIT ABB=ON PLU=ON L5 (1S) L13 (1S) L21
          88) SEA FILE=USPATFULL ABB=ON PLU=ON L6 (1S). L14 (1S) L22
L30 (
L31 (
           201) SEA FILE=PCTFULL ABB=ON PLU=ON L7 (1S) L15 (1S) L23
L32 (
           447) SEA L8 (1S) L16 (1S) L24
            1) SEA FILE=CAPLUS ABB=ON PLU=ON L25 (1S) (TREAT? OR PREVENT? OR
L33 (
L34 (
            0)SEA FILE=EMBASE ABB=ON PLU=ON L26 (1S) (TREAT? OR PREVENT? OR
L35 (
            0)SEA FILE=SCISEARCH ABB=ON PLU=ON L27 (1S) (TREAT? OR PREVENT?
L36 (
            0)SEA FILE=TOXCENTER ABB=ON PLU=ON L28 (1S) (TREAT? OR PREVENT?
L37 (
            0)SEA FILE=CANCERLIT ABB=ON PLU=ON L29 (1S) (TREAT? OR PREVENT?
L38 (
            1) SEA FILE=USPATFULL ABB=ON PLU=ON L30 (1S) (TREAT? OR PREVENT?
L39 (
            22) SEA FILE=PCTFULL ABB=ON PLU=ON L31 (1S) (TREAT? OR PREVENT? O
L40 (
           24) SEA L32 (1S) (TREAT? OR PREVENT? OR PROTECT? OR CUR? OR AVOID?
L41 (
            1)SEA FILE=CAPLUS ABB=ON PLU=ON (L25 (1S) (TREAT? OR PREVENT? O
             0)SEA FILE=EMBASE ABB=ON PLU=ON (L26 (1S) (TREAT? OR PREVENT? O
L42 (
             0)SEA FILE-SCISEARCH ABB-ON PLU-ON (L27 (1S) (TREAT? OR PREVENT
L43 (
             0) SEA FILE=TOXCENTER ABB=ON PLU=ON (L28 (1S) (TREAT? OR PREVENT
1.44 (
             0)SEA FILE=CANCERLIT ABB=ON PLU=ON (L29 (1S) (TREAT? OR PREVENT
145 (
            25) SEA FILE=USPATFULL ABB=ON PLU=ON (L30 (1S) (TREAT? OR PREVENT
1.46 (
L47 (
            47) SEA FILE=PCTFULL ABB=ON PLU=ON (L31 (1S) (TREAT? OR PREVENT?
            73) SEA (L32 (1S) (TREAT? OR PREVENT? OR PROTECT? OR CUR? OR AVOID?
L48 (
              _____
         80206 FILE CAPLUS
L49
          38777 FILE EMBASE
L50
L51
          51006 FILE SCISEARCH
L52
         13102 FILE TOXCENTER
L53
          4632 FILE CANCERLIT
L54
          69638 FILE USPATFULL
L55
         15288 FILE PCTFULL
     TOTAL FOR ALL FILES
        272649 S L8
L56
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	FILE 'CAPLUS, EMBASE, SCISEARCH, TO	XCENTER, CANCERLIT, USPATFULL' ENTERED				
	AT 07:40:36 ON 12 MAY 2004					
L57	821 FILE CAPLUS					
L58	258 FILE EMBASE					
L59	324 FILE SCISEARCH					
L60	142 FILE TOXCENTER					
L61	302 FILE CANCERLIT					
L62	1276 FILE USPATFULL	*				
	TOTAL FOR ALL FILES					
L63	3123 S L56 (1S) L16					
L64	4 FILE CAPLUS	•				
L65	4 FILE EMBASE					
L66	1 FILE SCISEARCH					
L67	4 FILE TOXCENTER					
L68	6 FILE CANCERLIT					
L69	87 FILE USPATFULL					
	TOTAL FOR ALL FILES					
L70	106 S L63 (2S) (INFLAMMAT? O	R ANTI-INFLAMMAT? OR ANTIINFLAMMAT? OR				
	SAVE ALL L09884466/L					

FILE 'STNGUIDE' ENTERED AT 07:47:56 ON 12 MAY 2004

```
=> s 116 (1s) ((side or unwanted or adverse) (3a) (effect? or consequence? or
result?))
            5 FILE CAPLUS
L17
           48 FILE EMBASE
L18
           16 FILE SCISEARCH
L19
           16 FILE TOXCENTER
L20
           75 FILE CANCERLIT
L21
           78 FILE USPATFULL
L22
           85 FILE PCTFULL
L23
TOTAL FOR ALL FILES
          323 L16 (1S) ((SIDE OR UNWANTED OR ADVERSE) (3A) (EFFECT? OR CONSEQU
L24
              ENCE? OR RESULT?))
=> s 124 (2s) (treat? or prevent? or protect? or cur? or avoid? or decreas? or
reduc?)
            4 FILE CAPLUS
L25
L26
           44 FILE EMBASE
L27 ·
           13 FILE SCISEARCH
L28
           15 FILE TOXCENTER
           71 FILE CANCERLIT
L29
L30
           67 FILE USPATFULL
           82 FILE PCTFULL
L31
TOTAL FOR ALL FILES
          296 L24 (2S) (TREAT? OR PREVENT? OR PROTECT? OR CUR? OR AVOID? OR
L32
              DECREAS? OR REDUC?)
=> s 132 and (inflammat? or antiinflammat? or anti-inflammat?)
L33
            1 FILE CAPLUS
            2 FILE EMBASE
L34
            0 FILE SCISEARCH
L35
            0 FILE TOXCENTER
L36
            1 FILE CANCERLIT
L37
           40 FILE USPATFULL
L38
           49 FILE PCTFULL
L39
TOTAL FOR ALL FILES
           93 L32 AND (INFLAMMAT? OR ANTI-INFLAMMAT?)
L40
=> dup rem 132
PROCESSING COMPLETED FOR L32
           239 DUP REM L32 (57 DUPLICATES REMOVED)
                ANSWERS '1-4' FROM FILE CAPLUS
                ANSWERS '5-46' FROM FILE EMBASE
                ANSWER '47' FROM FILE SCISEARCH
                ANSWERS '48-52' FROM FILE TOXCENTER
                ANSWERS '53-92' FROM FILE CANCERLIT
                ANSWERS '93-159' FROM FILE USPATFULL
                ANSWERS '160-239' FROM FILE PCTFULL
```

OR ?COXIB)

```
=> s (132 (1s) (treat? or prevent? or protect? or cur? or avoid? or decreas? or
reduc?)) and (cox? or cox2 or coxii or cycloxygenase or ?coxib)
             1 FILE CAPLUS
L41
             0 FILE EMBASE
L42
             0 FILE SCISEARCH
L43
             O FILE TOXCENTER
L44
           0 FILE CANCERLIT
25 FILE USPATFULL
L45
L46
            47 FILE PCTFULL
L47
TOTAL FOR ALL FILES
            73 (L32 (1S) (TREAT? OR PREVENT? OR PROTECT? OR CUR? OR AVOID? OR
L48
```

DECREAS? OR REDUC?)) AND (COX? OR COX1 OR COXII OR CYCLOXYGENASE OR ?COXIB)

=> save all ENTER NAME OR (END):109884466/1 L# LIST L1-L48 HAS BEEN SAVED AS 'L09884466/L' 75% OF LIMIT FOR SAVED L# LISTS REACHED

```
=> s fatigue or tiredness or (loss of energy)
L1
         80206 FILE CAPLUS
         38777 FILE EMBASE
L2
         51006 FILE SCISEARCH
L3
         13102 FILE TOXCENTER
L4
         4632 FILE CANCERLIT
L5
L6
         69638 FILE USPATFULL
1.7
         15288 FILE PCTFULL
TOTAL FOR ALL FILES
       272649 FATIGUE OR TIREDNESS OR (LOSS OF ENERGY)
L8
=> s radiation or (radio? (2w) (therapy or treatment))
       645419 FILE CAPLUS
L9
        204837 FILE EMBASE
L10
        281559 FILE SCISEARCH
L11
        299225 FILE TOXCENTER
L12
        109876 FILE CANCERLIT
L13
        303241 FILE USPATFULL
T.14
        77863 FILE PCTFULL
L15
TOTAL FOR ALL FILES
      1922020 RADIATION OR (RADIO? (2W) (THERAPY OR TREATMENT))
L16
=> s (side or adverse or unwanted) (2a) (effect? or consequenc? or result? or
outcome?)
L17
         86864 FILE CAPLUS
        400995 FILE EMBASE
L18
        99725 FILE SCISEARCH
L19
        712016 FILE TOXCENTER
L20
L21
        143723 FILE CANCERLIT
        209323 FILE USPATFULL
L22
L23
    62546 FILE PCTFULL
TOTAL FOR ALL FILES
       1715192 (SIDE OR ADVERSE OR UNWANTED) (2A) (EFFECT? OR CONSEQUENC? OR
L24
               RESULT? OR OUTCOME?)
=> s 18 (1s) 116 (1s) 124
            6 FILE CAPLUS
L25
L26
            45 FILE EMBASE
L27
            17 FILE SCISEARCH
L28
            18 FILE TOXCENTER
            72 FILE CANCERLIT
L29
            88 FILE USPATFULL
L30
           201 FILE PCTFULL
TOTAL FOR ALL FILES
           447 L8 (1S) L16 (1S) L24
=> s 132 (1s) (treat? or prevent? or protect? or cur? or avoid? or decreas? or
reduc?) (1s) (cox? or cox2 or coxii or cycloxygenase or ?coxib)
             1 FILE CAPLUS
L34
             O FILE EMBASE
             O FILE SCISEARCH
L35
             O FILE TOXCENTER
L36
             O FILE CANCERLIT
L37
L38
            1 FILE USPATFULL
            22 FILE PCTFULL
Ļ39
TOTAL FOR ALL FILES
            24 L32 (1S) (TREAT? OR PREVENT? OR PROTECT? OR CUR? OR AVOID? OR
L40
```

DECREAS? OR REDUC?) (1S) (COX? OR COX2 OR COXII OR CYCLOXYGENASE

L69 ANSWER 76 OF 87 USPATFULL on STN

SUMM

. . . resulting from oxidative stress are disease or pathologic states including damage caused by alcohol abuse, exposure to xenobiotic agents or radiation; intracellular oxidative states caused by hepatic diseases; intoxication from drugs and chemical agents (e.g. carcinostats including platinum chelate, antibiotics, antiparasitics,. . vessels and leukocyte adherence; various malformations such as Down's syndrome, Duchenne muscular dystrophy, Becker dystrophy, Dubin-Johnson-Spring syndrome and favism; and inflammatory diseases such as nephritis, pancreatitis, dermatitis, fatique and rheumatism. In particular, the dithiolan derivatives and pharmaceutically acceptable salts thereof of the present invention are useful for the prevention or treatment of diseases or pathologic states such as damage caused by radiation, intracellular oxidative states caused by hepatic diseases, intoxication (i.e. side effects) from carcinostats including platinum chelate, disorders of the nervous system, cataract, diabetes, hepatocyte necrosis and apoptosis, viral diseases, and inflammatory diseases.

SUMM

adenine and cysteine are known as medicaments for treating the damage caused by alcohol abuse, exposure to xenobiotic agents or radiation; aminoethylsulfonic acid, protoporphyrin disodium and diisopropylamine dichloroacetate are known as medicaments for treating intracellular oxidative states caused by hepatic diseases; . . blood vessels and leukocyte adherence; fenipentol, camostat mesylate, indomethacin, loxoprofen sodium and diclofenac sodium are known as medicaments for treating inflammatory diseases such as nephritis, pancreatitis, dermatitis, fatigue and rheumatism.

US 6313164

B1 20011106

PΙ

L69 ANSWER 70 OF 87 USPATFULL on STN

DETD [0019] Proposed Mechanism of Action; Tests. We propose that an inflammatory response mediates in part the acute mucosal intestinal, skin, lung, prostatic and bladder effects of ionizing radiation. Additionally we propose that a component of radiation induced fatigue is mediated by the inflammatory response and as reflected by acute phase reactant proteins that increase during radiotherapy.

PI US 2002035139 A1 20020321

```
L41 ANSWER 48 OF 239 TOXCENTER COPYRIGHT 2004 ACS on STN DUPLICATE 35
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- AN 1992:32156 TOXCENTER
- DN PubMed ID: 2134559
- TI Gastrointestinal side effects and quality of life in patients receiving radiation therapy
- AU Padilla G V
- CS School of Nursing, University of California, Los Angeles 90024-1702
- NC CA 31164 (NCI)
- SO Nutrition (Burbank, Los Angeles County, Calif.), (1990 Sep-Oct) 6 (5) 367-70.

 Journal Code: 8802712. ISSN: 0899-9007.
- CY United States
- DT Journal; Article; (JOURNAL ARTICLE)
- FS MEDLINE
- OS MEDLINE 92199870
- LA English
- ED Entered STN: 20011116 Last Updated on STN: 20011116
- A sample of 101 patients from four radiation oncology clinics participated AB in a study to describe the relative impact of gastrointestinal side effects of radiation therapy on the psychological and physical well-being dimensions of quality of life. Stepwise regression analysis showed that 44.2% of the variance in psychological well-being was accounted for by patient-reported gastrointestinal problems (21.5%), tension-anxiety (11.8%), other side effects of radiation (5.4%), and satisfaction with care (5.5%). A similar analysis revealed that 50.7% of the variance in physical well-being was accounted for by patient-reported fatigue (35.5%), gastrointestinal problems (8.8%), other side effects (4%), and willingness to comply (2.4%). Although treatment dose and field size directly impact on the severity of side effects, these results suggest that it is the perception of side effects as problems that impacts on psychological and physical well-being.
- CT Check Tags: Female; Human; Male; Support, U.S. Gov't, P.H.S.
 - *Digestive System: RE, radiation effects

Fatigue: ET, etiology

Middle Aged

- L41 ANSWER 29 OF 239 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS DUPLICATE 29 RESERVED. on STN
- 97228082 EMBASE AN
- 1997228082 DN
- TIPatient, caregiver, and oncologist perceptions of cancer-related fatigue: Results of a tripart assessment survey.
- Vogelzang N.J.; Breitbart W.; Cella D.; Curt G.A.; Groopman J.E.; Horning AU S.J.; Itri L.M.; Johnson D.H.; Saherr S.L.; Portenoy R.K.
- Dr. N.J. Vogelzang, Director of Genitourinary Oncology, University of CS Chicago, 5841 S Maryland Ave, Chicago, IL 60637-1463, United States
- Seminars in Hematology, (1997) 34/3 SUPPL. 3 (4-12). SO Refs: 27
 - ISSN: 0037-1963 CODEN: SEHEA3
- CY United States
- DT Journal; Conference Article
- FS 016 Cancer
 - Public Health, Social Medicine and Epidemiology 017
- 025 Hematology
- LA English
- SL English
- Although fatigue is the most common symptom reported by cancer AΒ patients and has serious adverse effects on quality of life, it remains poorly understood. A survey was designed to characterize the epidemiology of cancer- related fatigue from the perspectives of the patient, primary caregiver, and oncologist. A telephone survey included 419 cancer patients recruited from 100,000 randomly selected households nationwide. Patients provided access to 200 primary caregivers (usually family members) who were also interviewed by telephone. In a separate mail survey, 197 of 600 randomly sampled oncologists (unrelated to the patients) responded to a questionnaire that assessed perceptions and attitudes concerning fatigue in cancer patients who had received chemotherapy or radiotherapy and their caregivers. The median patient age was 65 years, and the principal cancer diagnoses were breast (females) and genitourinary (males). Fifty-nine percent of the patients had received chemotherapy, 63% radiation therapy, and 24% both; 20% of patients received their last treatment within 6 weeks, 31% within 7 weeks to 1 year, and 49% more than 1 year ago. More than three quarters of patients (78%) experienced fatigue (defined as a general feeling of debilitating tiredness or loss of energy) during the course of their disease and treatment. Thirty- two percent experienced fatigue daily, and 32% reported fatigue significantly affected their daily routines. Caregivers reported observing fatigue in 86% of the index patients, and oncologists perceived that 76% of their patients experienced fatigue. Although oncologists believed that pain adversely affected their patients to a greater degree than fatigue (61% v 37%), patients felt that fatigue adversely affected their daily lives more than pain (61% v 19%). Most oncologists (80%) believed fatigue is overlooked or undertreated, and most patients (74%) considered fatigue a symptom to be endured. Fifty percent of patients did not discuss treatment options with their oncologists, and only 27% reported that their oncologists recommended any treatment for fatigue. When used, treatments for fatigue were generally perceived by patients and caregivers to be successful. These data confirm the high prevalence and adverse impact of cancer-related **fatigue**, although it is seldom discussed and infrequently treated. For patients and oncologists, improving the quality of life of cancer patients requires a heightened awareness of fatigue, a better understanding of its impact, and improved communication and familiarity with interventions that can reduce its debilitating effects.

Medical Descriptors:

*fatigue: EP, epidemiology

*fatigue: CO, complication
*fatigue: TH, therapy
*fatigue: ET, etiology
adult
aged
cancer: DI, diagnosis
cancer pain: CO, complication
cancer pain: EP, epidemiology
cancer patient
caregiver
conference paper
doctor patient relation
female
human
major clinical study

male
patient attitude
patient care
physician att

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L41 ANSWER 32 OF 239 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS
                                                       DUPLICATE 32
    RESERVED. on STN
    92080577 EMBASE
AN
    1992080577
DN
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Fatigue syndrome due to localized radiation. TIGreenberg D.B.; Sawicka J.; Eisenthal S.; Ross D. ΑU

- Massachusetts General Hospital Cancer Center, Cox 2, 100 Blossom Street, CS Boston, MA 02114, United States
- Journal of Pain and Symptom Management, (1992) 7/1 (38-45). SO ISSN: 0885-3924 CODEN: JPSMEU
- CY United States
- Journal; Article DT
- Cancer FS 016
- LA English
- SL English
- For cancer patients, fatigue is a disturbing symptom caused by AB many factors. Since fatigue is the most common side effect of localized radiation to the breast, this treatment provides a unique opportunity to follow patients prospectively as they develop one type of fatigue. We evaluated the effect of radiation treatment in 15 women with Stage I or II node-negative breast cancer who were otherwise healthy. Fatigue, contrary to our hypothesis, did not increase linearly with cumulative radiation dose over time. It dropped from the first to second week and rose in the third week. The cumulative effects reached a plateau in the fourth week (after an average of 17 fractions), which was maintained during the remaining weeks of treatment. Within 3 wk after treatment, fatigue had diminished. No patient had sustained depressive symptoms. Cardiopulmonary exercise capacity in 5 patients at 6 and 12 wk did not change from just before radiation. Other markers, including reverse triiodothyronine and pulse change with orthostatic stress, did not correlate with subjective fatique nor cumulative radiation in 15 patients. The curve of the fatique syndrome during treatment conforms to the adaptation of the organism to a continuing stress and begins to describe a mild fatigue syndrome associated with radiation.
- Medical Descriptors:
 - *asthenia
 - *chronic fatigue syndrome

 - article
 - clinical article
 - female
 - human
 - social aspect

acute pancreatitis; ALS; Alzheimer's disease; cachexia/anorexia; asthma; atherosclerosis; chronic fatique syndrome, fever; diabetes (e.g., insulin diabetes); glomerulonephritis; graft versus host rejection; hemohorragic shock; hyperalgesia, inflammatory bowel disease; inflammatory conditions of a joint, including osteoarthritisf. . . CML) and other leukemias; myopathies (e.g., muscle protein metabolismf esp. in sepsis); osteoporosis; Parkinson's disease; pain; pre-term labor; psoriasis; reperfusion injury; septic shock; side effects from radiation therapy, temporal mandibular joint disease, tumor metastasis; or an inflammatory condition resulting from strain, sprain, cartilage damage, trauma, orthopedic surgery, infection or other disease. . IL-1 inhibitor (e.g., preferably IL-lra product and more preferably IL-1ra) in combination (pretreatment, post-treatment or concurrent treatment) with any of one or more COX2 inhibitors, their prodrug esters or pharmaceutically acceptable salts thereof for the treatment of acute and chronic inflammation. Examples of COX2 inhibitors, prodrug esters or pharmaceutically acceptable salts thereof include, for example, celecoxib. Structurally related COX2 inhibitors having similar analgesic and anti-inflammatory properties are also intended to be encompassed by this group. 1997028828 PCTFULL ED 20020514 ACCESSION NUMBER: COMPOSITION COMPRISING INTERLEUKIN-1 INHIBITOR AND TITLE (ENGLISH): CONTROLLED RELEASE POLYMER COMPOSITION COMPRENANT UN INHIBITEUR DE L'INTERLEUKINE TITLE (FRENCH): 1 ET UN POLYMERE A LIBERATION CONTROLEE COLLINS, David, S.; INVENTOR(S): BEVILACQUA, Michael, P. AMGEN BOULDER INC.; PATENT ASSIGNEE(S): COLLINS, David, S.; BEVILACQUA, Michael, P. English LANGUAGE OF PUBL.: DOCUMENT TYPE: Patent PATENT INFORMATION:

DATE

A1 19970814

KIND

NUMBER

WO 9728828

DESIGNATED STATES

```
chemotherapy and immunotherapy are alternatives to surgical
       treatment of cancer
       (Mayer, 1998; Ohara, 1998; Ho et al., 1998). Radiation therapy
       involves a precise
      aiming of high energy radiation to destroy cancer cells and
      much like surgery, is mainly
      effective in the treatment of non-metastasized, localized
      cancer cells. Side effects of
         radiation therapy include skin irritation, difficulty
       swallowing, dry mouth, nausea,
       diarrhea, hair loss and loss of energy (
      Curran, 1998; Brizel, 1998).
      Chemotherapy, the treatment of cancer with anti-cancer drugs,
       is another mode of
      cancer therapy. The effectiveness of a given anti-cancer drug therapy
      often is,. .
      influenza A, B and C, parainfluenza, paramyxoviruses,
      Newcastle disease virus, respiratory syncytial virus, measles, mumps,
      adenoviruses,
       adenoassociated viruses, parvoviruses, Epstein-Barr virus, rhinoviruses,
       coxsackieviruses,
       echovirases, reoviruses, rhabdoviruses, lymphocytic choriomeningitis,
       coronavirus,
       polioviruses, herpes simplex viruses, human immunodeficiency viruses,
       cytornegaloviruses, papillornavirases, virus B, varicella-zoster,
       poxviruses, rubella,
       rabies, picomaviruses, rotaviruses and.
      NF-1, NF WT-1, MEN MEN-II, zacl, p73, VHL, MMACI / PTEN,
       DBCCR-1, FCC, rsk-3, p27, p27/pl6 fusions, p21/p27 fusions,
       anti-thrombotic genes
       (e.g., COX-1, TFP1), PGS, genes involved in angiogenesis
       (e.g., VEGF, FGF,
       thrombospondin, BAI-1, GDAIF) and MCC.
                        2002045737 PCTFULL ED 20020624 EW 200224
ACCESSION NUMBER:
                        METHODS OF TREATMENT INVOLVING HUMAN MDA-7
TITLE (ENGLISH):
                        PROCEDES DE TRAITEMENT METTANT EN APPLICATION MDA-7
TITLE (FRENCH):
                        HUMAIN
                        CHADA, Sunil, 2250 Holcombe Blvd., Houston, TX 77030,
INVENTOR(S):
                        US [US, US];
                        GRIMM, Elizabeth, Houston, TX, US [& #x2014;, US];
                        MHASHILKAR, Abner, 2250 Holcombe Blvd., Houston, TX
                        77030, US [US, US];
                        SCHROCK, Bob, 2250 Holcombe Blvd., Houston, TX 77030,
                        US [US, US];
                        RAJAGOPAL, Ramesh, 2250 Holcombe Blvd., Houston, TX
                        77030, US [US, US]
                        BOARD OF REGENTS, THE UNIVERSITY OF TEXAS SYSTEM, 201
PATENT ASSIGNEE(S):
                        West 7th Street, Austin, TX 78701, US [US, US], for all
                        designates States except US;
                        CHADA, Sunil, 2250 Holcombe Blvd., Houston, TX 77030,
                        US [US, US], for US only;
                        GRIMM, Elizabeth, Houston, TX, US [—, US], for
                        US only;
                        MHASHILKAR, Abner, 2250 Holcombe Blvd., Houston, TX
                        77030, US [US, US], for US only;
                        SCHROCK, Bob, 2250 Holcombe Blvd., Houston, TX 77030,
                        US [US, US], for US only;
                        RAJAGOPAL, Ramesh, 2250 Holcombe Blvd., Houston, TX
                        77030, US [US, US], for US only
                        SHISHIMA, Gina, N.$, Fulbright & Jaworski L.L.P., Suite
AGENT:
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2400, 600 Congress Avenue, Austin, TX 78701\$, US

LANGUAGE OF FILING: English LANGUAGE OF PUBL.: English DOCUMENT TYPE: Patent

PATENT INFORMATION:

NUMBER KIND DATE

WO 2002045737 A2 20020613

DESIGNATED STATES

W:

AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH PL PT RO RU SD SE SG SI

SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZM ZW

RW (ARIPO): RW (EAPO): RW (EPO):

GH GM KE LS MW MZ SD SL SZ TZ UG ZM ZW

AM AZ BY KG KZ MD RU TJ TM

AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE

RW (OAPI): APPLICATION INFO.: BF BJ CF CG CI CM GA GN GQ GW ML MR NE SN TD TG

WO 2001-US47215

A 20011207

PRIORITY INFO.:

US 2000-60/254,22

DETD . . . any remaining cancer cells, or alone or with anticancer drugs to destroy a malignant tumor. It is particularly effective when used to treat certain types of localized cancers such as malignant tumors of the lymph nodes or vocal cords.

Radiation usually is not per se curative if the cancer cells have spread throughout the body or outside the area of radiation. It can be used even if a cure is not probable because it can shrink tumors, which decreases the pressure and pain they cause, or it can stop their bleeding.

Generally, radiation produces less physical disfigurement than radical surgery does, but it may produce severe side effects. These side effects are related to the damage x-rays do to normal tissue such as blood or bone

1 5 marrow. Side effects include irritated skin, swallowing difficulties, dry mouth, nausea, diarrhea, hair loss, and a loss of energy. How serious and extensive these side effects become depend on where and how much radiation is used.

Use of the present radionuclide complexes can ${\tt reduce}$ or eliminate the need for total

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L48. ANSWER 12 OF 73 USPATFULL on STN
DETD
       . . series prostaglandins; bisphosphonates (such as alendronate and
       others); bone-enhancing minerals such as fluoride and calcium;
       non-steroidal anti-inflammatory drugs (NSAIDs), including cox
       -2 inhibitors, such as Celebrex.TM. and Vioxx.TM.; immunosuppressants,
       such as methotrexate or leflunomide; serine protease inhibitors such as
       secretory leukocyte protease.
       [0313] A non-exclusive list of acute and chronic diseases
DETD
       treatable in accordance with the invention include, but is not
       limited to, the following: cachexia/anorexia; cancer (e.g., leukemias);
       chronic fatigue syndrome; coronary conditions and indications,
       including congestive heart failure, coronary restenosis, myocardial
       infarction, and coronary artery bypass graft; depression; diabetes.
          vasculitis, Lyme disease, staphylococcal-induced ("septic")
       arthritis, Sjogren's syndrome, rheumatic fever, polychondritis and
       polymyalgia rheumatica and giant cell arteritis); septic shock;
       side effects from radiation therapy;
       systemic lupus erythematosus; temporal mandibular joint disease;
       thyroiditis; tissue transplantation or an inflammatory condition
       resulting from strain, sprain, cartilage.
                                                 . .
DETD
       . . . to the use of a TNFr/OPG-like polypeptide in combination
       (pretreatment, post-treatment, or concurrent treatment) with any of one
       or more COX2 inhibitors, prodrug esters or pharmaceutically
       acceptable salts thereof for the treatment of TNF-responsive diseases,
       including acute and chronic inflammation. Examples of COX2
       inhibitors, prodrug esters or pharmaceutically acceptable salts thereof
       include, for example, celecoxib. Structurally related
       COX2 inhibitors having similar analgesic and anti-inflammatory
       properties are also intended to be encompassed by this group.
ACCESSION NUMBER:
                        2003:112516 USPATFULL
TITLE:
                        TNFr/OPG-like molecules and uses thereof
INVENTOR(S):
                        Welcher, Andrew A., Ventura, CA, UNITED STATES
                        Fox, Gary M., Newbury Park, CA, UNITED STATES
                        Boedigheimer, Michael J., Newbury Park, CA, UNITED
                        Shu, Junyan, Thousand Oaks, CA, UNITED STATES
                        Jing, Shuqian, Thousand Oaks, CA, UNITED STATES
                        Bennett, Brian D., Thousand Oaks, CA, UNITED STATES
                        Luethy, Roland, Camarillo, CA, UNITED STATES .
                             NUMBER ·
                                        KIND
PATENT INFORMATION:
                        US 2003077246
                                        A1 20030424
                        US 2002-146574 A1
APPLICATION INFO.:
                                                20020515 (10)
RELATED APPLN. INFO.:
                        Division of Ser. No. US 2000-724037, filed on 28 Nov
                        2000, PENDING
                              NUMBER
                                           DATE
PRIORITY INFORMATION:
                        US 1999-172306P 19991216 (60)
DOCUMENT TYPE:
                        Utility
FILE SEGMENT:
                        APPLICATION
LEGAL REPRESENTATIVE:
                        MARSHALL, GERSTEIN & BORUN, Thomas A. Cawley, Jr.
                        Ph.D., Sears Tower, Suite 6300, 233 S. Wacker Drive,
                        Chicago, IL, 60606-6357
NUMBER OF CLAIMS:
                        82
EXEMPLARY CLAIM:
                        1
NUMBER OF DRAWINGS:
                        19 Drawing Page(s)
LINE COUNT:
                        5435
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L48 ANSWER 13 OF 73 USPATFULL on STN

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD [0140] In accordance with the present invention, there also are provided

methods for the treatment of various inflammatory diseases. These disease would be those triggered by the IKK and JNK pathways, and involving NF-κB. The primary causes of such inflammatory reactions are tumor necrosis factor and IL-1. Diseases that may be treated in accordance with the present invention include, but are not limited to, rheumatoid arthritis, asthma inflammatory bowel disease and psoriasis, allergic rhinitis, various dermatological conditions, acute pancreatitis; ALS; Alzheimer's disease; cachexia/anorexia; atherosclerosis; chronic fatigue syndrome, fever; diabetes (e.g., insulin diabetes); glomerulonephritis; graft versus host rejection; hemohorragic shock; hyperalgesia, inflammatory conditions of a joint, including. . . muscle protein metabolism, esp. in sepsis); osteoporosis; Parkinson's disease; congestive heart failure, cardiac hypertrophy; intraamniotic infection; reperfusion injury; septic shock; side effects from radiation therapy, temporal mandibular joint disease, tumor metastasis; or an inflammatory

condition resulting from strain, sprain, cartilage damage, trauma, orthopedic surgery,. .

DETD

. . . agents may be applied in any combination with the present invention. Suitable anti-inflammatory agents include the NSAIDs (aspirin, ibuprofen, naproxen, celecoxib, rofecoxib, sulindac, etc.), Advil, Aleve, Anaprox, Diclofenac, Docosahexaenoic acid, Dolobid, Etodolac, Feldene, Flurbiprofen, Indomethacin, Ketorolac tromethamine, Lodine, Meclofenamate, 6-MNA, Motrin, Nalfon,.

ACCESSION NUMBER:

2003:106186 USPATFULL

TITLE:

TRAF6-regulated IKK activators (TRIKA1 and TRIKA2) and

their use as anti-inflammatory targets

INVENTOR(S):

Chen, Zhijian J., Dallas, TX, UNITED STATES

Deng, Li, Dallas, TX, UNITED STATES

NUMBER KIND -----

PATENT INFORMATION:

US 2003073097

A1 20030417

APPLICATION INFO.:

US 2001-76918

A1 20011011 (10)

DOCUMENT TYPE:

Utility

FILE SEGMENT:

APPLICATION

LEGAL REPRESENTATIVE:

Steven L. Highlander, Fulbright & Jaworski L.L.P., Suite 2400, 600 Congress Avenue, Austin, TX, 78701

NUMBER OF CLAIMS:

66

EXEMPLARY CLAIM:

1

NUMBER OF DRAWINGS:

3 Drawing Page(s)

LINE COUNT:

2613

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

L48 ANSWER 14 OF 73 USPATFULL on STN

DETD [0133] The present invention also relates to methods for the treatment of certain diseases and medical conditions (many of which can be characterized as inflammatory diseases) that are mediated by IL-1,. . . and chronic interleukin-1 (IL-1)-mediated diseases includes but is not limited to the following: ALS; Alzheimer's disease; asthma; atherosclerosis; cachexia/anorexia; chronic fatigue syndrome, depression; diabetes (e.g., juvenile onset Type 1 and diabetes mellitus); fever; fibromyelgia or analgesia; glomerulonephritis; graft versus host rejection;. . . vasculitis, Lyme disease, staphylococcal-induced ("septic") arthritis, Sjogren's syndrome, rheumatic fever, polychondritis and polymyalgia rheumatica and giant cell arteritis); septic shock; side effects from radiation therapy; temporal mandibular joint disease; tumor metastasis; or an inflammatory condition resulting from strain, sprain, cartilage damage, trauma, orthopedic surgery,.

. . to the use of an IL-1 inhibitor (e.g., preferably an IL-1ra protein product(s) and more preferably IL-1ra) in combination (pretreatment, post-treatment or concurrent treatment) with any of one or more TNF inhibitors for the treatment of

DETD

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IL-1 mediated diseases, including acute and chronic inflammation such as
       cachexia/anorexia; chronic fatigue syndrome, depression;
       diabetes (e.g., juvenile onset Type 1 and diabetes mellitus);
       fibromyelgia or analgesia; graft versus host rejection; hyperalgesia,
       inflammatory. . . vasculitis, Lyme disease, staphylococcal-induced
       ("septic") arthritis, Sjogren's syndrome, rheumatic fever,
       polychondritis and polymyalgia rheumatica and giant cell arteritis);
       septic shock; side effects from radiation
       therapy; temporal mandibular joint disease; tumor metastasis; or an
       inflammatory condition resulting from strain, sprain, cartilage damage,
       trauma, orthopedic surgery,. . . to the use of an IL-1 inhibitor
       (e.g., preferably an IL-1ra protein product(s) and more preferably
       IL-1ra) in combination (pretreatment, post-treatment or
       concurrent treatment) with any of one or more of the following
       TNF inhibitors: TNF binding proteins (soluble TNF receptor type I and.
       . . IL-1ra protein product(s) and more preferably IL-1ra) in
       combination (pretreatment, post-treatment or concurrent treatment) with
       any of one or more COX2 inhibitors, prodrug esters or
       pharmaceutically acceptable salts thereof for the treatment of IL-1
      mediated diseases, including acute and chronic inflammation. Examples of
      COX2 inhibitors, prodrug esters or pharmaceutically acceptable
       salts thereof include, for example, celecoxib. Structurally
      related COX2 inhibitors having similar analgesic and
      anti-inflammatory properties are also intended to be encompassed by this
       . . . controlled release polymer (e.g., a dextran or hyaluronan), the
      citrate buffer formulation or the phosphate buffer formulation) in
       combination (pretreatment, post-treatment or concurrent
       treatment) with sTNFRs for the treatment of
       IL-1-mediated diseases, including acute and chronic inflammation such as
       cachexia/anorexia; chronic fatigue syndrome, depression;
       diabetes (e.g., juvenile onset Type 1 and diabetes mellitus);
       fibromyelgia or analgesia; graft versus host rejection; hyperalgesia,
       inflammatory. . . vasculitis, Lyme disease, staphylococcal-induced
       ("septic") arthritis, Sjogren's syndrome, rheumatic fever,
       polychondritis and polymyalgia rheumatica and giant cell arteritis);
       septic shock; side effects from radiation
       therapy; temporal mandibular joint disease; tumor metastasis; or an
       inflammatory condition resulting from strain, sprain, cartilage damage,
       trauma, orthopedic surgery,.
                        2003:105845 USPATFULL
ACCESSION NUMBER:
                        Combination therapy using an IL-1 inhibitor and
```

DETD

DETD

TITLE:

methotrexate

Bendele, Alison M., Nederland, CO, UNITED STATES INVENTOR(S):

Sennello, Regina M., Boulder, CO, UNITED STATES

PATENT ASSIGNEE(S): Amgen Inc. (U.S. corporation)

	NUMBER	KIND	DATE	
PATENT INFORMATION: APPLICATION INFO.:	US 2003072756 US 2002-265037			(10)
RELATED APPLN. INFO.:	Continuation of	Ser. No.	. US 1999-	326260, filed on 4 Jun
1999, PENDING Continuation of Ser. No. WO 1997-US22 filed on 8 Dec 1997, PENDING				

	NUMBER	DATE		
		-		
PRIORITY INFORMATION:	US 1996-32790P	19961206	(60)	
	US 1997-36353P	19970123	(60)	
	US 1997-39311P	19970207	(60)	
	US 1997-52025P	19970709	(60)	
DOCUMENT TYPE:	Utility			
FILE SEGMENT:	APPLICATION			

LEGAL REPRESENTATIVE: AMGEN INCORPORATED, MAIL STOP 27-4-A, ONE AMGEN CENTER

DRIVE, THOUSAND OAKS, CA, 91320-1799

NUMBER OF CLAIMS: EXEMPLARY CLAIM: 26 1

NUMBER OF DRAWINGS:

8 Drawing Page(s)

LINE COUNT:

2478

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

L48 ANSWER 10 OF 73 USPATFULL on STN

. . J., 259:315-324 (1989)] from arachidonic acid in response to SUMM stimuli. Prostaglandins are produced from arachidonic acid by the action of COX-1 and COX-2 enzymes. Arachidonic acid is also the substrate for the distinct enzyme pathway leading to the production of leukotrienes.

. . on all of them. For example, ibuprofen, aspirin, and SUMM indomethacin are all NSAIDs which inhibit the production of prostaglandins by COX-1/COX-2, but have no effect on the inflammatory production of leukotrienes from arachidonic acid in the other pathways. Conversely, zileuton inhibits. . .

. . . compounds, pharmaceutical compositions and regimens of the DETD present invention are useful in treating and preventing the disorders treated by cyclooxygenase-2, cycloxygenase-1, and 5-lipoxygenase inhibitors and also are antagonists of the receptors for PAF, leukotrienes or prostaglandins. Diseases treatable by compounds, formulations.

. . . of utilizing the compounds herein in combination with a DETD proteinaceous interleukin-1 inhibitor, such as an IL-1 receptor antagonist (IL-Ira), for preventing or treating inflammatory diseases in a mammal. Acute and chronic interleukin-1 (IL-1)-mediated inflammatory diseases of interest in these methods include, but is not limited to acute pancreatitis; ALS; Alzheimer's disease; cachexia/anorexia; asthma; atherosclerosis; chronic fatique syndrome, fever; diabetes (e.g., insulin diabetes); glomerulonephritis; graft versus host rejection; hemohorragic shock; hyperalgesia, inflammatory bowel disease; inflammatory conditions of. . leukemias; myopathies (e.g., muscle protein metabolism, esp. in sepsis); osteoporosis; Parkinson's disease; pain; pre-term labor; psoriasis; reperfusion injury; septic shock; side effects from radiation therapy, temporal mandibular joint disease, tumor metastasis; or an inflammatory condition resulting from strain, sprain, cartilage damage, trauma, orthopedic surgery,. .

ACCESSION NUMBER: 2003:220460 USPATFULL

Inhibitors of phospholipase enzymes TITLE:

Seehra, Jasbir S., Lexington, MA, UNITED STATES INVENTOR(S):

Kaila, Neelu, Natick, MA, UNITED STATES McKew, John C., Arlington, MA, UNITED STATES Lovering, Frank, Acton, MA, UNITED STATES Bemis, Jean E., Arlington, MA, UNITED STATES Xiang, YiBin, Acton, MA, UNITED STATES

American Home Products Corporation, Madison, NJ (U.S. PATENT ASSIGNEE(S):

corporation)

NUMBER KIND DATE _____

US 2003153751 A1 20030814 US 2002-75079 A1 20020508 (10) PATENT INFORMATION: APPLICATION INFO.:

Continuation of Ser. No. US 2000-677006, filed on 29 RELATED APPLN. INFO.: Sep 2000, ABANDONED Continuation-in-part of Ser. No. US

1999-256413, filed on 24 Feb 1999, ABANDONED

NUMBER DATE _____

US 1998-100426P 19980225 (60) PRIORITY INFORMATION:

Utility DOCUMENT TYPE: APPLICATION FILE SEGMENT:

Steven R. Eck, Five Giralda Farms, Madison, NJ, 07940 LEGAL REPRESENTATIVE:

97 NUMBER OF CLAIMS: EXEMPLARY CLAIM: 7 LINE COUNT: 4764

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

L69 ANSWER 70 OF 87 USPATFULL on STN

[0019] Proposed Mechanism of Action; Tests. We propose that an DETD

inflammatory response mediates in part the acute mucosal

intestinal, skin, lung, prostatic and bladder effects of ionizing

radiation. Additionally we propose that a component of

radiation induced fatigue is mediated by the

inflammatory response and as reflected by acute phase reactant

proteins that increase during radiotherapy.

ACCESSION NUMBER:

2002:61303 USPATFULL

TITLE:

COX-2 inhibitors and the prevention of the side effects

of radiation therapy

INVENTOR(S):

Herbst, Arthur L., Chicago, IL, UNITED STATES

Weichselbaum, Ralph, Chicago, IL, UNITED STATES

	NUMBER	KIND	DATE	
ON: .:	US 2002035139 US 2001-884466	A1 A1	20020321	(9) / hap) 12 st
	NUMBER	DA	TE	De profit in
TION:	US 2000-212685P Utility	2000	0620 (60)	Adm. Hed

PATENT INFORMATIO APPLICATION INFO.

US 2000-212685P PRIORITY INFORMATION:

DOCUMENT TYPE:

FILE SEGMENT: APPLICATION

MCDERMOTT WILL & EMERY, 600 13TH STREET, N.W. LEGAL REPRESENTATIVE:

WASHINGTON, DC, 20005-3096

NUMBER OF CLAIMS:

EXEMPLARY CLAIM:

NUMBER OF DRAWINGS:

2 Drawing Page(s)

LINE COUNT: 347

CAS INDEXING IS AVAILABLE FOR THIS PATENT.